

EXHIBIT D

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Date: Thu, 04 Nov 2004 16:48:42 -0500

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From: "PIA Team7 PIA Team7" <PIA#032#Team7@sl.universalservice.org>

To: <MADELINE#032#MELGEN@17877310000>

CC: <mmelgen@escuelascaticas-sj.org>

Subject: Various E-Rate Applications

November 4, 2004

MADELINE MELGEN

Application# 399717 - ACADEMIA CRISTO REY

Application# 412620 - COLEGIO MADRE CABRINI

Application# 412652 - COLEGIO MADRE CABRINI

Application# 413108 - ACADEMIA NUESTRA SRA DE LA PROVIDENCIA

Application# 414847 - COLEGIO REINA DE LOS ANGELES

Contact Phone Number:(787) 7316100

Dear Ms. Melgen,

The Program Integrity Assurance (PIA) team is in the process of reviewing all Form 471 Applications for schools and libraries discounts to ensure that they are in compliance with the rules of the federal universal service program. We are currently in the process of reviewing your Funding Year 2004 Form 471 Application. To complete our review, we need some additional information. The information needed to complete the review is listed below :

1.) For the following Applications/FNRs, the additional documentation (Puerto Rico Telephone Company statement) provided to validate your funding request included charges for: *telefono primario negocio*, *teletcla negocio*, and *telefono adicional negocio* charges. The rules of this support mechanism require that charges associated with possible ineligible items be identified in order to determine the eligibility of the request. Please provide documentation identifying the charges associated with the items that were identified above.

If the bill you receive does not identify the specific products and services associated with these charges, you will need to contact your vendor and request such documentation. The vendor should be able to provide you with a detailed bill identifying the specific products and services being provided, which is sometimes called a C.R.I.S. Report.

Any documentation provided should clearly identify any ineligible charges that were cost allocated out of your request. If you are unable to justify the charges requested on your Form 471, the request may be reduced or denied.

---Application#399717 - FRN1093026

---Application#412652 - FRN1132208

---Application#399717 - FRN1093026

2.) Please provide the type of service and the number of lines for the following :

---Application#399717 - FRN1093026

---Application#412652 - FRN1132208

---Application#413108 - FRN1133723 & 1133754

---Application#414847 - FRN1140209

3.) For the following Application#s, telephone bills provided do not support the requested amount. Please provide additional bills that can support the total request per FRN. If there are no other bills that can support the request, please specify also.

---Application#399717 - FRN1093026 - Request=\$358 Support=\$124.55

---Application#412652 - FRN1132208 - Request=\$560 Support=\$245.00

4.) For the following Application#s, Please provide supporting documents as indicated :

---Application#412620 - FRN1132111 - make model and functionality of Cisco Router, Switches and UPS.

5.) Based upon review of your Form 471 application, we were not able to validate your requested discount percentage of the following :

Application# 399717 - ACADEMIA CRISTO REY - 80%

Application# 412620 - COLEGIO MADRE CABRINI - 90%

Application# 412652 - COLEGIO MADRE CABRINI - 90%

Application# 413108 - ACADEMIA NUESTRA SRA DE LA PROV - 60%

Application# 414847 - COLEGIO REINA DE LOS ANGELES - 80%

If you choose to validate your original requested discount percentage above, then please provide the appropriate documentation if one of the following acceptable methods were used:


a. If the school participates in a National School Lunch Program (NSLP), please provide us a signed copy (preferably by the Principal, Vice-Principal, Superintendent, or Director of Food Services) of the Reimbursement Claim Form that the school sends to the state each month. Make sure that the following 3 items are identified:

- 1) The Entity name
- 2) The total number of students enrolled at the entity
- 3) The total number of students eligible for Free/Reduced Lunch Program for the entity

If the school district fills out an aggregate form for the school district, provide a signed letter from a school official (preferably the Superintendent) that lists the Free/Reduced information for each school in the district.

b. If the discount percentage was determined by information obtained from a survey/application, please provide the following information:

- 1) Total number of students enrolled
- 2) Total number of surveys/applications sent out
- 3) Number of surveys/applications returned
- 4) Total number of students qualified for NSLP per the returned surveys/applications
- 5) Are the surveys/applications and results kept on file.
- 6) Provide a sample copy of a FILLED OUT SURVEY/APPLICATION with the child's personal information crossed out for confidentiality.
- 7) A signed certification that reads: "I certify that only those students who meet the Income Eligibility Guidelines of the National School Lunch Program have been included in Column 5 of Item 10b, of Block 4 (Worksheet A) of the Form 471."

 This information must be in writing on school letterhead and signed by a school official (such as the Principal, Vice-Principal, Superintendent, Director of Food Services).

c. If the discount was determined using a different method than what was identified above, please indicate the method that was used and provide all relevant data.

Please fax or e-mail the requested information to my attention. If you have any questions, please feel free to contact me.

It is important that we receive all of the information requested so we can complete our review. Failure to do so may result in a reduction or denial of funding.

Please send the requested information within seven calendar days. If you need additional time to prepare your response, please let me know as soon as possible.

Thank you for cooperation and continued support of the Universal Service Program.

Sincerely,

Zoilo A. Magpile
PIA - Team 7
Schools And Libraries Division
Program Integrity Assurance
Phone: 1-973-560-4489
FAX: 1-973-599-6578
e-mail address : zmagpil@sl.universalservice.org



Open WebMail version 1.53

C.C.C.A.S.J.



**Consorcio Colegios Católicos
Arquidiócesis de San Juan**

Edificio 2021 Carr. 177 Guaynabo, Puerto Rico 00969-5140

Teléfono (787) 731-6100 Fax (787) 731-0000

November 10, 2004

Zoilo A. Magpile
School & Libraries Division
Program Integrity Assurance
Fax 1-973-599-6578

Application # 412847 – Colegio Reina de los Angeles

2) FRN 1140209 – Type of service and number of lines:

The school has 2 telephone lines for local and long distance calls.

5) Discount Percentage Validation:

Enclosed you will find requested information.

Cordially,

A handwritten signature in cursive script, reading "Marieglorie Zapata".

Marieglorie Zapata
E-Rate Administrative Assistant
mzapata@escuelascaticas-sj.org

“Sirviendo a los Colegios Católicos de San Juan”



Colegio "Reina de los Angeles"

Frontera M-19, Villa Andalucía, Río Piedras, Puerto Rico 00926

November 10, 2004

Zoilo A. Magpile
PIA - Team 7
Schools and Libraries Division
Program Integrity Assurance
Fax (973) 599-6578

For school year 7 (2004-2005) Colegio Reina de los Angeles (Application #414847) wants to validate the original requested discount of 80%.

- | | |
|--|-----|
| 1. Total number of students enrolled | 185 |
| 2. Number of surveys/applications sent out | 185 |
| 3. Number of surveys/applications returned | 185 |
| 4. Total number of students qualified for NSLP
(As per the returned surveys/applications) | 121 |
| 5. Are the surveys/applications and results kept on file | YES |

"I certify that only those students who meet the Income Eligibility Guidelines of the National School Lunch Program have been included in Column 5 Item 10b of Block 4 (worksheet A) of the Form 471".

Enclosed is a copy of the survey applied.

Cordially,

Sor Rosa M. Trujillo
Sor Rosa Maria Trujillo
Principal

mza

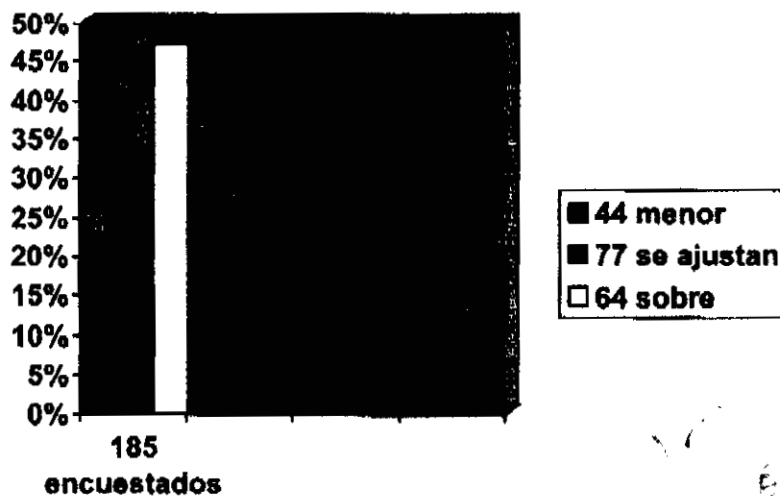
COLEGIO REINA DE LOS ANGELES

Resultado del estudio socio económico curso escolar 2003 - 2004

Se repartieron 185 formularios de Kinder a sexto grado

Contestaron las siguientes familias:

- 44 encuestados por debajo del ingreso familiar reflejado en la tabla.
- 77 encuestados se ajustan al ingreso familiar reflejado en la tabla.
- 64 familias sobre el nivel de ingreso familiar reflejado en la tabla.



COLEGIO REINA DE LOS ANGELES

Estimados padres:

14/ene /2003

A continuación tabla para el estudio socio-económico de las familias del Colegio correspondiente al curso escolar 2003-2004. Favor hacer su selección de acuerdo al nivel que le ajuste. No es necesario que escriba información personal alguna.

Haga un circulo alrededor del número de su tamaño familiar y marque en uno de los tres encasillados que se encuentran debajo de la tabla, si el ingreso que aparece se ajusta al suyo o no.

Favor de llenar una hoja por cada niño que tenga en el Colegio.

Gracias

Tamaño familiar	Ingreso máximo familiar*			Total estudiantes
	Anual	Mensual	Semanal	
2	20,813	1,735	401	
3	26,178	2,182	504	
4	31,543	2,629	607	
5	36,908	3,076	710	
6	42,273	3,523	813	
7	47,638	3,970	917	
8	53,003	4,417	1,020	
Por cada miembro adicional añadir...	5,365	448	104	

- ☐ Ingreso máximo familiar se ajusta al nuestro
- ☐ Ingreso máximo familiar es menor que este
- ☐ Ingreso máximo familiar

TRANSMISSION VERIFICATION REPORT

TIME : 11/08/2004 13:53
NAME :
FAX :
TEL :

DATE, TIME
FAX NO. /NAME
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C.C.C.A.S.J.



**Consorcio Colegios Católicos
Arquidiócesis de San Juan**

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Teléfono (787) 731-6100 Fax (787) 731-0000

November 10, 2004

Zoilo A. Magpile
School & Libraries Division
Program Integrity Assurance
Fax 1-973-599-6578

Application # 412847 – Colegio Reina de los Angeles

2) FRN 1140209 – Type of service and number of lines:

The school has 2 telephone lines for local and long distance calls.

5) Discount Percentage Validation:

Enclosed you will find requested information.

EXHIBIT F



Universal Service Administrative Company
Schools & Libraries Division

CASE SR-2004-BEN-200423

Date: February 10, 2005
To: Madeline Melgen
E-Mail: mmelgen@escuelascaticas-sj.org
Entity: **200423 - COLEGIO REINA DE LOS ANGELES**
Fax #: [Fax: Madeline Melgen@1 787 272 0771]
Phone: 787-731-6100
Sender: Bob Leipow
Phone: 973-581-6738
Fax: 973-599-6515
E-mail: rleipow@sl.universalservice.org
Subject: Funding year 2004 Selective Review Follow-Up Questions

*** **

This FAX is a follow-up to the information Marielglorie Zapata sent to Jennifer Hung on October 15, 2004 regarding our selective review of **COLEGIO REINA DE LOS ANGELES**. I've taken over Jennifer Hung's responsibilities for completing this selective review. In this letter we are requesting the approved operating budget for this school. The budget that was sent is not labeled the approved operating budget.

It is important that we receive all of the information requested by the close of business February 18, 2005. If we do not receive the information by then, your application will be reviewed using the information currently on file, which could result in a reduction or denial of funding. If you need additional time to prepare your response, please let me know as soon as possible. Please fax or e-mail the requested information to my attention. If you have any questions please feel free to contact me.

-1-

BUDGET:

- At this time, **do you have an approved operating budget for 2004-2005?** If so, please submit an operating budget for 2004-2005 showing **both revenues and expenses**, indicating where your portion of e-rate is allocated.
 - **State that it is the approved operating budget.**
 - Be sure to specify the **name of the school** to which the budget applies.
 - Please clearly specify the **time frame** that the budget covers, including a starting date and ending date (for example, July 1, 2003 - Jun 30, 2004).
 - **Writing on the actual budget, place an arrow next to each fund/budget line, on BOTH the revenue and expense side of your budget, showing where you have allocated the necessary dollars for your share of E-Rate. Please write the**

specific amount that will come from each fund/budget line. For example, if budget line A002 contains \$200,000 and \$130,000 will be used to pay your share of E-Rate, then please draw an arrow to line A002 and write "E-Rate, \$130,000."

- **Please DO NOT point to the overall total budget line. You must point to the proper individual budget line. Do this for both Expenses & Revenue(income).**
- Note: if a final, approved budget is provided; we may verify that budget with independent sources
- **If an approved budget is still not available** or in the early stages of an approval process, **we will need two items.** The first is a letter signed by a school or library official (superintendent, board president, chief business administrator). This letter should explain what phase of the approval process you are in, whether your share of funding is contingent on any outside action (e.g. voter approval, board approval, state legislation, etc.) and whether in the absence of such outside approval, you anticipate being able to meet your share of the E-RATE amount. Also make sure that the letter identifies the specific amount that you will have available to pay your share. For example, if you have \$100,000 that you will be putting in your budget, make sure that that is noted in the letter. **In addition** to that letter (and in lieu of a finalized budget), we will need **one of the following** as noted below:
 - A draft budget for FY 2004-2005 showing both revenues and expenses indicating from where your portion of e-rate is coming.
 - A resolution of a governing Board authorizing the filing of a Form(s) 471 for a given dollar amount, for given services and/or products, within a given timeframe. For us to consider such a resolution sufficient evidence that your entity has provided for payment of your share of E-rate, the resolution should specify the funding year, the fiscal year, or the school year during which the payment is authorized.
 - If donations (or other dollars from any contributor) are a source, a signed commitment letter from the donor (e.g. school or library foundation) to the applicant specifying 1) the level and commitment of funds or other resources, 2) the timing of the delivery of such resources, along with a positive indication that the resources are for E-rate supported products/services or for items needed to use effectively with the discounted services. (The indication as to the use of the resources might come from the donor or be reflected in a Board resolution committing donations to E-rate related purposes.)
 - Please note: If a final, approved budget is **not** available, we require a **combination** of a letter (described above) **AND** one of the bulleted examples above. We require **both**, **not** one or the other.

Please do not hesitate to call me, should you have any questions. Thank you for your cooperation and remember that any information requested must be faxed or e-mailed within 7 calendar days from today. If you need additional time to prepare your response, please let me know as soon as possible. If you are going to send e-mail to me, please make sure that at the end of your e-mail you have your Full Name and Official Title. Please call me if you have questions at 973-581-6738

Thank you.

Bob Leipow

Selective Reviewer

Associate Manager - SLD

Phone: 1-973-581-6738

Fax: 1-973-599-6515

Email: rleipow@sl.universalservice.org



80 South Jefferson Road
Whippany, New Jersey 07981
Fax: 973-599-6515

Universal Service Administrative Company
Schools & Libraries

FAX TRANSMISSION COVER SHEET

To: Madeline Melgen
Fax: 1 787 731 0000
Subject: CASE SR-2004-BEN-200423 - COLEGIO REINA DE LOS ANGELES
From: PIAIntegrated
Date: February 10, 2005
Time: 9:51:56 AM

YOU SHOULD RECEIVE 4 PAGE(S), INCLUDING THIS COVER SHEET. IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL THE CONTACT SPECIFIED BELOW.

Date: February 10, 2005

To: Madeline Melgen
E-Mail: mmelgen@escuelascaticas-sj.org
Entity: **200423 – COLEGIO REINA DE LOS ANGELES**
Fax #: [Fax: Madeline Melgen@1 787 731 0000]
Phone: 787-731-6100

Sender: Bob Leipow

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Phone: 973-581-6738

Fax: 973-599-6515

E-mail: rleipow@sl.universalservice.org

Subject: Funding year 2004 Selective Review Follow-Up Questions

This FAX is a follow-up to the information Marieglorie Zapata sent to Jennifer Hung on October 15, 2004 regarding our selective review of **COLEGIO REINA DE LOS ANGELES**. I've taken over Jennifer Hung's responsibilities for completing this selective review. In this letter we are requesting the approved operating budget for this school. The budget that was sent is not labeled the approved operating budget.

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Please refer to the attached document.

C.C.C.A.S.J.



***Consorcio Colegios Católicos
Arquidiócesis de San Juan***

Edificio 2021 Carr. 177 Guaynabo, Puerto Rico 00969-5140

Teléfono (787) 731-6100 Fax (787) 731-0000

**TO: Bob Leipow
Selective Reviewer
Associate Manager
Fax 1-973-599-6515**

**FROM: Marieglorie Zapata
E-Rate Administrative Assistant**

DATE: February 24, 2005

**RE: COLEGIO REINA DE LOS ANGELES
CASE SR-2004-BEN-20423**

PAGES: 2

Attached is the requested information.

mza

**COLEGIO REINA DE LOS ANGELES
PRESUPUESTO FINAL APROBADO****1ro JULIO, 2004 @ JUNIO 30, 2005****INGRESOS**

Ingresos de Matrícula	\$ 38,980.00	
Mensualidades	\$ 392,150.00	x E-rate income
Actividades	\$ 38,630.00	\$ 3,921.60
Cuotas Especiales y Misceláneos	\$ 103,540.00	

Sub-total \$ 573,300.00**Gastos Administrativos**

Salarios	\$ 297,489.20	
Gastos de Nómina	\$ 2,545.00	
Servicios Profesionales	\$ 24,500.00	
Agua y Luz	\$ 12,200.00	
Servicio Telefónico	\$ 3,000.00	
Acceso Internet	\$ 2,023.20	} E-rate expense \$ 3,921.60
Equipo Tecnológico	\$ 2,000.00	
Cargos Bancarios	\$ 1,000.00	
Suministros de Oficina	\$ 1,500.00	
Materiales Educativos	\$ 10,000.00	
Reparaciones y Mantenimiento	\$ 50,500.00	
Seguro Estudiantil	\$ 1,800.00	
Intereses Bancarios	\$	
Cuota diocesana	\$ 3,435.00	
Seguros	\$ 25,000.00	
Gasto Automóvil	\$ 2,000.00	
Misceláneos	\$ 73,400.00	

Sub-total \$ 512,392.40**Sobrante de Operaciones****Total \$ 60,907.60****Aprobado por:**


Sor Rosa María Trujillo
Directora

TRANSMISSION VERIFICATION REPORT

TIME : 02/23/2005 19:41
NAME : SUPERINTENDENCIA
FAX : 7877310000
TEL : 7877316100

DATE, TIME
FAX NO./NAME
DURATION
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02/23 19:41
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C.C.C.A.S.J.



**Consorcio Colegios Católicos
Arquidiócesis de San Juan**

Edificio 2021 Carr. 177 Guaynabo, Puerto Rico 00969-5140
Teléfono (787) 731-6100 Fax (787) 731-0000

TO:

**Bob Leipow
Selective Reviewer
Associate Manager
Fax 1-973-599-6515**

FROM:

**Marieglorie Zapata
E-Rate Administrative Assistant**

DATE:

February 24, 2005

RE:

**COLEGIO REINA DE LOS ANGELES
CASE SR-2004-BEN-20423**

PAGES:

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